

DO/EO BIBLIOGRAPHIC DATA ENTRY

SERIAL NUMBER: 09 / 831627 RECEIPT DATE: 05 / 11 / 01  
IA NUMBER: PCT/ US99 / 24017 IA FILING DATE: 11 / 12 / 99  
FAMILY NAME: BUKOVSKY DELAY WAIVED (Y/N): N  
GIVEN NAME: ANATOLY DEMAND RECEIVED (Y/N): Y  
PRIORITY CLAIMED (Y/N): Y PRIORITY DATE: 11 / 13 / 98  
NO BASIC FEE (Y/N): N US DESIGNATED ONLY (Y/N): N  
ATTORNEY DOCKET NUMBER: 41613 COUNTRY:  
CORRESPONDENCE NAME/ADDRESS: CUSTOMER NUMBER: 000000 TELEPHONE 2026599076  
FAX

NAME: ROYLANCE ABRAMS BERDO & GOODMAN

STREET: 1300 19TH STREET N W SUITE 600

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STATE/COUNTRY: DC ZIP: 20036

EMAIL:

APPLICATION TITLES:

SENSITIVE SCREENING SYSTEM FOR ENVELOPE DEFECTIVE RECOMBINANT VIRUS

TAB TO LAST POSITION,PUSH SEND